

RECEIVED PCT/PTO 25 MAR 2005

<b>POWER OF ATTORNEY OR AUTHORIZATION OF AGENT</b>	Application Number	10/501,451
	Filing Date	July 13, 2004
	First Named Inventor	James LUPTON
	Group Art Unit	Not Yet Assigned
	Examiner Name	Not Yet Assigned
	Attorney Docket Number	31229-205449

I hereby appoint:

☒ Practitioners at Customer Number **20684** → Place Customer Number Bar Code Label here

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

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OR

☐ Firm or Individual Name: **VENABLE LLP**

Address: **P.O. Box 34386**

City: **Washington** State: **D.C.** ZIP: **20043-9999**

Country: **U.S.A.**

Telephone: **(202) 344-4000** Fax: **(202) 344-8300**

I am the:

☐ Applicant.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
*Certificate under 37 (CFR) 3.73(b) is enclosed (Form PTO/SB/98).*

**SIGNATURE of Applicant or Assignee of Record**

Name	<b>JAMES LUPTON</b>
Signature	<i>[Handwritten Signature]</i>
Date	<b>10/03/05</b>

NOTE: Signatures of all the Inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

Burden Hour Statement: This form is estimated to take 5 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PG Docs No. 624571

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> <b>(37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing      OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	31229-205449
	First Named Inventor	James Lupton
	COMPLETE IF KNOWN	
	Application Number	Not Yet Assigned
	Filing Date	July 13, 2004
	Art Unit	N/A
Examiner Name	Not Yet Assigned	

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MODULAR BUILDING SYSTEM

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 07/13/2004 as United States Application Number or PCT International

Application Number PCT/GB02/05919 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
0200881.1	GB	01/16/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

**DECLARATION — Utility or Design Patent Application**

Rec'd PCT/PTO 25 MAR 2007

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number		26694		OR <input type="checkbox"/> Correspondence address below	
Name							
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
James				Lupton			
Inventor's Signature				Date		13 September 2004 X	
Residence: City		State		Country		Citizenship	
Wakefield				United Kingdom		US	
Mailing Address:		Lupton Court Prospect Road Ossett					
City		State		ZIP		Country	
West Yorkshire				WF5 8AF		United Kingdom	
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Mailing Address:							
City		State		ZIP		Country	
<input type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.							

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X